



PATENT  
ATTORNEY DOCKET NO.: 0307091.166

### COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled WIRELESS VEHICLE-MONITORING SYSTEM OPERATING ON BOTH TERRESTRIAL AND SATELLITE NETWORKS, the specification of which

☒ is attached hereto.

☐ was filed on \_\_\_\_\_, as Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.

☐ was described and claimed in PCT International Application No. \_\_\_\_\_  
filed on \_\_\_\_\_ and as amended under PCT Article 19 on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendments referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

**COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED**

Application Number(s)	Filing Date (MM/DD/YYYY)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information we know to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

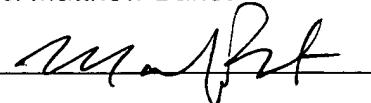
**Practitioners at Customer Numbers: 035602; 022832; and 026285**

Address all telephone calls to **Stephen C. Glazier** at telephone number **202.778.9045**.

Address all correspondence to **Practitioners at Customer Number 035602**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: **Matthew Banet**

Inventor's Signature: 

Date: 11/08/07

Residence: **Del Mar, California**

Citizen of: **United States of America**

Post Office Address: **12719 Via Felino, Del Mar, California 92014**

**COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED**

Full Name of Inventor: ~~Larkin Lowrey~~

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Residence Address: ~~La Jolla, California~~

Citizen of: ~~United States of America~~

Post Office Address: ~~8031 Caminito Mallorca, La Jolla, California 92037~~

Full Name of Inventor: Paul Washicko

Inventor's Signature: Paul Washicko

Date: 2/23/04

Residence Address: Carlsbad, CA

Citizen of: United States of America

Post Office Address: P.O. Box 1744 Carlsbad, CA 92018

Full Name of Inventor: Michael O'Brien

Inventor's Signature: Michael P. O'Brien

Date: 1/8/2004

Residence Address: Temecula, California

Citizen of: United States of America

Post Office Address: 42074 Acacia Way, Temecula, California 92591



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**COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED**

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**Practitioners at Customer Numbers: 035602; 022832; and 026285**

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Full Name of Inventor: **Matthew Banet**

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Residence: **Del Mar, California**

Citizen of: **United States of America**

Post Office Address: **12719 Via Felino, Del Mar, California 92014**

COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

Full Name of Inventor: Larkin Lowrey

Inventor's Signature: Larkin Lowrey Date: 2/10/04

Residence Address: ~~La Jolla, California~~ SEABROOK, TEXAS

Citizen of: United States of America

Post Office Address: ~~8031 Caminito Mallorca, La Jolla, California 92037~~  
2610 LA TECH LN, SEABROOK, TEXAS 77586

Full Name of Inventor: Paul Washicko

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Citizen of: United States of America

Post Office Address: \_\_\_\_\_

Full Name of Inventor: Michael O'Brien

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence Address: Temecula, California

Citizen of: United States of America

Post Office Address: 42074 Acacia Way, Temecula, California 92591